THE CLEVELAND MUSEUM OF ART FORTY-SIXTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE

Born	in	Cleveland	YES	NC

	MAY 6 to JUNE 14 1964										
PLEASE	ETT ELAIN	Collaborator if any		NONE Briarcliff Pkwy		Cleveland ZIP CODE	FRANK FIRST NAME 44130 Cuyaho COUNTY		TICHY LAST NAME PAGE TEL BE-4-765		
				er return shipment is req							
	Please enclos	se Registration	Fee of \$2:00	(Check or Money Order)	with Entry Blank.						
	NUMBER FOR SALE	NUMBER IN EDITION (Graphic Prts.)	PRICE		TITLE			MEDIUM	CLASS	DO NOT WRITE THESE COLUM	
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SUBMIT ENTRY BLANK NO LATER THAN MARCH 9, 1964.

This entry blank must be fully made out (typewritten or plainly lettered) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1964.

It is also understood that accepted entries will remain on exhibition until June 14, 1964.

The submission of entries will be construed as acceptance of all conditions printed this entry blank.

SIGNATURE